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THE CANADIAN NURSE

AND HOSPITAL REVIEW

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THE

CANADIAN NURSE

A Monthly Journal for the Nursing Profession in Canada

Editor and Business Manager.....MISS HELEN RANDAL, R.N.

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Additional Members of Executive: Chairman, Public Health Section, Miss Florence Emory, 26 Algonquin Avenue, Toronto, Ontario; Chairman, Private Duty Section, Miss Edith Gaskell, 397 Huron Street, Toronto, Ontario.

Saskatchewan Registered Nurses in Annual Convention

The sixth annual convention of the S.R.N.A., held in Saskatoon on Thursday and Friday, April 5th and 6th, was one of the most successful conventions in the history of the association. Nurses were in attendance from almost every part of the province, and all enjoyed the interesting and carefully prepared papers, as well as entering freely into the discussions and business of the meeting.

Miss Ruby Simpson, the president, presided at all sessions.

Greetings were received from Miss Jean Browne and Miss Jean Wilson, of the National Association.

The president gave a most interesting review of the year's work, emphasizing our obligations arising from provincial and national affiliations. Regret was expressed that the university was this year unable to

arrange for a session for nurses in connection with the summer school, and the president urged that the convenors of the three standing committees would so interest their members during the coming year that the number ready to attend the summer school in 1924 would quite justify the university in arranging a course for nurses.

Following the reports of the registrar and treasurer, reports were given by the convenors of the three standing committees. Owing to a new convenor of the Nurse Education Committee having recently been appointed, this committee had little definite progress to report. Matters referred to by the C.N.A.T.N. had, however, been sent to each member of the committee, as well as to the superintendent of each training school, and were receiving careful consideration. The report of the Private Duty Nurse Committee, with the suggestion from the National Section for consideration of a "refresher course for private duty nurses," was received with interest. Sister Mayer and Miss Helen Cameron, both of Saskatoon, were appointed to present the opinion of such a course from the viewpoint of a training school superintendent and of a private duty nurse.

Following the report of the Press Committee, a nurse was appointed to secure new subscriptions from those in attendance at the convention.

The report of the Memorial Committee, presented by Miss Simpson, showed that three thousand dollars had been forwarded to the National Committee. A resolution was passed urging the raising of the remaining two thousand dollars required to complete Saskatchewan's objective, and asking that all contributions should be in before May 31st next. It was felt that the nurses in some of the smaller hospital centers had been unable to raise funds, as the former appeal was made shortly before Christmas, and the earnest desire was expressed that our contribution would represent a tribute from every individual nurse living or actively engaged in nursing in Saskatchewan. The same committee was asked to continue in office, and all contributions should be sent to Miss R. M. Simpson, Department of Education, Regina.

The suggested amendment to By-law No. 7 on "Annual Fees" was further amended, and finally accepted, to read as follows: "(d) Members in arrears for five years or more shall forfeit membership in the association, but such members may be reinstated upon payment of fees in arrears or of such penalty as may be fixed by the Nurses' Council."

The by-law referring to reciprocal registration was also discussed, the general opinion being that some alteration in the wording of the clause was desirable. The Nurses' Council was asked to present an amendment for consideration at the next annual meeting.

The papers and addresses were all of great interest and value. Before the paper on "Tuberculosis," given by Dr. Boughton, of the sanitarium staff, the president spoke of the campaign inaugurated by the Provincial Council of Women to raise $50,000 to aid the tubercular mothers of the

province who are unable otherwise to secure sanitarium care. A resolution heartily endorsing the campaign was passed, and a collection was taken up in aid of the Everywoman Fund.

Following Dr. Boughton's address, the film, "The Fight Against Tuberculosis," was shown. This gave a very good idea of the work of the Anti-Tuberculosis League as carried on in the splendid institution at Fort Qu'Appelle.

The first evening was largely of a social nature; addresses of welcome, musical numbers, and an illustrated address by Professor Miller, of the university staff, descriptive of one of the beautiful Old World cathedrals, proving most enjoyable and restful. Luncheons, dinners and teas, and a theatre party the last evening, showed Saskatoon's reputation for hospitality as well earned.

The officers elected for the coming year were: President, Miss R. M. Simpson, Regina; first vice-president, Miss E. Eisele, Moose Jaw; second vice-president, Sister Mayer, Saskatoon; councillors, Miss M. Montgomery, Fort Qu'Appelle, and Mrs. Feeney, Yorkton. Convenors of standing committees: Public Health, Miss Hilda McDonald, Saskatoon; Nurse Education, Miss S. A. Campbell, Saskatoon; Private Duty Nursing, Miss H. Cameron, Saskatoon.

The invitation from the Regina association to hold the 1924 annual meeting in Regina was accepted. An invitation was also extended by Miss Montgomery that one day of the convention should be spent at the sanitarium at Fort Qu'Appelle. This invitation was left for consideration of the Nurses' Council, when definite plans should be made for the convention.

THE OIL OF JOY

Christianity wants nothing so much in the world as sunny people, and the old are hungrier for love than for bread. The oil of Joy is very cheap; and if you can help the poor with a Garment of Praise, it will be better for them than blankets.—HENRY DRUMMOND.

Let the one who sighs for comfort
Feel a hand-grasp true;
It will cheer the way, and surely
Can't impoverish you.

Lives are human, though so often
We disguise our pain;
Some are hungering for your comfort—
Give and give again.

The Story of Insulin. Diabetic Truce Declared

The Armistice between Allies and Central Powers brought peace in 1918; the truce between death and diabetes brought hope in 1922. But just as men died at the front before the news could be flashed along the wires, so men will die in the byways before science can apply its new discovery—insulin.

While physicians consider it too early to estimate the complete value of this new treatment for diabetes, reports from careful observers indicate that Dr. F. G. Banting, of Toronto, and his co-workers have made an important contribution to medicine.

Lepine was the first to suggest that the condition of diabetes following pancreatectomy might be due to the withdrawal of an internal secretion necessary for the complete metabolism of sugar. Later it was discovered that the extracts of certain ductless glands, such as the adrenals, have marked pharmacological actions and that the administration of these extracts can relieve symptoms due to the atrophy of their glands. Still later it was shown that a graft of pancreatic tissue is capable of relieving diabetes after the pancreas has been removed. It was therefore concluded that an antidiabetic substance or hormone was secreted by the pancreas, though many experiments to isolate it were unsuccessful.

Years of Research

In making such an experiment Banting ligated the pancreatic duct; this experiment caused the degeneration of all the pancreatic tissue except the islands of Langerhans which secrete the antidiabetic hormone. The next step was the extraction of this substance by alcohol and its utilization to reduce sugar in the blood of a severe diabetic case. There remained the problems of obtaining a purer extract and of ascertaining the dosage. The former difficulty was solved by Dr. Collip by a method of fractional precipitation by alcohol; the latter was worked out by experimentation on rabbits.

The university has taken steps to safeguard the production, standardization and distribution of insulin, and the physicians receiving samples of the extract are reporting their experiences as to its potency and value. It is also under observation in the clinics of Dr. Banting at the Christie Street Hospital of the Soldiers' Civil Re-establishment in Toronto, of Dr. Duncan Graham in the Toronto General Hospital, and in certain diabetic clinics in the United States.

The Clinical Dosage

At present in estimating the clinical dosage it has been found satisfactory to consider "as one unit the amount of insulin which, on subcutaneous injection, can lower the percentage of blood sugar to 0.045 within four hours in a rabbit weighing about 2 kg. from which food has

been withheld for from sixteen to twenty-four hours. The final solutions of insulin prepared in the University of Toronto for chemical use are usually concentrated so that 1 c. cm. contains one unit."

Further investigations have proved that this extract is also effective in relieving the other phenomena of diabetes. It has been found to raise the respiratory quotient (an evidence of increased sugar metabolism) and reduce the urinary excretion of acetone bodies. In fact, in a dog, where the latter phenomenon is less pronounced than in man, the acetone bodies clear up entirely. By the use of the extract for two days the glycogen content of the liver reaches 12 per cent. while the fat content falls from 12 per cent. to 5 per cent., and there is also a diminution of fat in the blood content. These observations indicate that insulin, because of its influence on carbohydrate metabolism, also affects fat metabolism.

Other Causes

Insulin not only removes the symptoms of diabetes due to the absence of the pancreatic hormone in the body, but it also prevents the development of an abnormally high sugar content of the blood and presumably of a urinary excretion of sugar, even when these phenomena are induced by other experimental means, such as puncture of the floor of the fourth ventrical of the medulla, or asphyxia. That insulin will almost entirely prevent an increase in the sugar content of the blood following ether anaesthesia has a practical application in surgery.

Attempts to determine the mode of action of insulin by experiments on drawn blood, muscle tissue and extirpated liver tissue have thus far proved unsuccessful. It was found in experimentation upon rabbits that an overdose of insulin which produced convulsions not unlike those of diabetic coma could be antidoted by the injection of glucose. In one or two patients in whom there were indications of these symptoms, exhibition of glucose immediately and permanently removed them.

Its Future Utility

To date a sufficient number of cases have been observed to justify the statement that insulin given subcutaneously will remove cardinal symptoms of the disease within a very short time for a period of several hours. To suppress the symptoms permanently, however, the injections must be repeated, the practice at present being twice daily; whether the diabetic condition is in any degree cured by the rest which is given to the damaged pancreatic function cannot as yet be stated.

Government reports show that in 1921 15,000 deaths occurred from diabetes mellitus in the registration area of the United States, ranging from 21.8 (per 100,000 population) in New York State to 6.4 in Tennessee.

May science wear league boots!

—*The Trained Nurse and Hospital Review.*

Lectures on The History of Nursing

WITH DESCRIPTIVE LIST OF LANTERN-SLIDES

By MAUDE E. SEYMOUR ABBOTT, B.A., M.D.,
Curator of the Medical Museum, McGill University

LECTURE XI.

(Continued from last month.)

The Canadian V. A. D. War Service

Slide 310. The first Overseas Group that sailed from Montreal, September, 1916. Mrs. V. V. Henderson, Lady District Superintendent of St. John Ambulance Brigade for the Province of Quebec, who organized the Montreal Division for active service in 1915, in the center. In outdoor uniform.

Slide 311. The five Montrealers who formed the first group of Muscle Function Trainers, graduated from Hart House, Toronto. Like the V.A.D. Nursing members, these are volunteer unpaid workers under the control of the District Superintendent of the Brigade. They are in the uniform of this department of the V.A.D.

Lady Perley's Voluntary Aid Detachment.

Early in 1918, H. R. H. Princess Mary formed a Voluntary Aid Detachment in England, and at the same time four Imperial Detachments were formed there also, one for Canadians under Lady Perley, one for Australians under Lady Robinson, one for New Zealand under Miss MacKenzie, and one for members from South Africa under Lady Gladstone. These Detachments were organized independently of the Canadian V. A. D. Military Service, and were entirely under British Control; with all other V. A. D's. they received orders through Devonshire House. Lady Perley's Voluntary Aid Detachment was composed of Canadian ladies who paid their own expenses to England, and the majority of whom had done good work in hospitals there before being mobilized under Lady Perley, an event which happened as a result of representations made by the Canadian Red Cross Committee to Ampthill and Oliver. Her first party sailed for Boulogne in March, 1918, and were there employed in the Rest House for British and Canadian Nursing Sisters, organized by the Canadian Red Cross at this time. This hostel was staffed entirely by Lady Perley's V. A. D's., ten in number, with Mrs. Gordon Brown, of Ottawa, as Commandant. It performed an active and efficient service throughout the trying period of the spring of 1918, and later these V.A.D's., with others, remained on duty there until June, 1919. Their work was entirely volunteer and unpaid. So also with the work of the other V. A. D's. in Lady Perley's Detachment, which increased rapidly by the joining up of numerous members, drawn

especially from the splendidly efficient body of workers working in the Canadian Red Cross Information Bureau under Lady Drummond and elsewhere. Their activities lay chiefly in visiting patients in the military hospitals, assisting in recreation huts, nursing in hospitals, organizing entertainments, enquiries for wounded, and in running the hostel for the nursing staff above mentioned.

Slide 312. Lady Perley's first Detachment at the hospital in Boulogne, with Lady Perley and Lady Drummond in centre.

Slide 313. Lady Perley in the uniform of her V.A.D. Detachment.

The War Service of the British Red Cross Society.

The vast work accomplished during the Great War by the British Red Cross is detailed with that of the Order of St. John under the official report of the Joint War Committee, 1914-1919, which forms a volume of 738 pages. All funds raised from the "Times" Fund, and other volunteer agencies for both organizations were turned in to the Joint Committee and applied at the discretion of its Council, which was drawn from members of the British Red Cross, the Order of St. John and the Territorial Force, to the best advantage of the Supplementary Auxiliary Service required by the British War Office. Over £21,000,000 Sterling was contributed, and of this, more than £20,000,000 was expended in war activities, the balance remaining to carry on the post-war work of this Society. These war activities were so extensive as to make it impossible to enumerate them here in any detail. They include, in addition to the sending of a steady stream of supplementary stores to all parts of the seat of war to meet emergency demands of all kinds, ambulance trains, motor ambulances, X-Ray cars, motor bacteriological and dental laboratories and launches, hospital ships, recreation huts, convalescent homes and hospitals of all kinds, a central prisoner of war department, officiating to the salvation of the lives of starving thousands in the enemy country, and finally in the organizing, training, and putting in the field over 125,000 of a magnificient personnel, who supplied a service supplementary to the military operations of the Allies, the value of which cannot be told. Among Nursing Units supplied by the British Red Cross may be mentioned: Ambulance Units and Field Hospitals sent to Russia and Roumania; the two Serbian Units, of which the first left in October, 1918, and combatted the great typhus epidemic of the following year, and the second (Lady Paget's) left in January, 1915, and was interned with Dr. Inglis's unit in Serbia; twenty-four Red Cross kitchens in Salonika and Corfu; in Mesopotamia and Northern Persia, ninety-four motor launches were operated; in England itself 3,244 Red Cross Auxiliary Home Hospitals were financed, in addition to numerous convalescent homes; in France and Belgium were the well-known British Red Cross Hospitals Nos. 1 to 10, (mostly financed by private individuals), the Anglo-Belgian Hospital at Calais, and the hospitals of the Paris Committee, all important centres; and in Egypt and Palestine operations

were carried on on a maginficent scale. The British Red Cross accomplished throughout the war a work of world-wide extent and importance that brought comfort and relief in every emergency from the First Aid Post to the Base Hospital by means of its splendid organization and unlimited supplies. The following extract from a letter to Dame Sarah Swift, G. B. E., Matron-in-chief of the Joint War Committee in England throughout the war from Surgeon-General Sir Alfred Keogh, Director of Medical Services War Office, expresses the general feeling in regard to the value of the nursing service rendered:

"I am not sure that we even yet fully realize the work of the fully trained nurses in these institutions. No praise is too great for the example they set and the patience they have displayed. It is also difficult to express admiration for the extraordinary devotion shown by the V. A. D.'s. and the administration of the hospitals, and by the public in the neighbourhoods. The whole movement formed a splendid spectacle of patriotism which has far surpassed my most sanguine expectations."

Extract from the official report of the Joint War Committee.

Slide 314. Uniform of (a) British Red Cross Society Commandant; (b) Order of St. John Commandant; (c) British Red Cross Society members, outdoors; (d) British Red Cross Society member, indoor.

Slide 315. (a) Order of St. John Member Indoor Uniform; (b) Order of St. John General Service Member, Outdoor Uniform; (c) British Red Cross Society and Order of St. John, off-duty dress, all ranks; (d) British Red Cross Society and Order of St. John Orderly Khaki Uniform.

Slide 316. Outline map of Scotland, showing distribution of Red Cross Auxiliary Hospitals in 1918.

The Anglo-Russian Hospital

(Organized by Lady Muriel Paget by private subscription.)

Of all the volunteer activities supported from private sources and operated under the aegis of the British Red Cross at the seat of war, perhaps the most interest for Canadians attaches to the Anglo-Russian Hospital Corps, which numbered several Canadian nurses on its staff and which served through circumstances of great danger and difficulty, both in the Caucasus and in Petrograd, where it was established, in the house of Prince Dmitri at the time of the outbreak of the Russian revolution. Nursing Sister Edith Hegan, R.R.C., of St. John, (now Mrs. Basil Stead, of Ottawa,) a graduate of the Presbyterian Hospital, New York, served with conspicuous bravery and devotion in it, and has published a stirring eye-witness account of the bloody scenes of the revolution as they unrolled themselves "From a Hospital Window."* Nursing Sister Dorothy Cotton was the first Canadian Sister selected for service with Anglo-Russian Hospital. She subsequently went to Roumania

in charge of the Canadian Nursing Mission organized by Mme. Pantazzi in October, 1920, at the call of the Queen of Roumania.

Slide 317. Outline map of Scotland, showing distribution of Red Cross

Slide 318. Nursing Sister Dorothy Cotton, of Ottawa, Canada, graduate of the Royal Victoria Hospital, Montreal, Matron of the Canadian Mission to Roumania and who served at Petrograd with Miss Hegan.

* See Harper's Monthly Magazine, 1918.

(To be Continued)

THE PROBLEM

A bare, bleak house with hardly the necessary furniture; a Greek mother who spoke very little English and was half sick most of the time; a family of nine children, ranging from three to fifteen years, all anaemic and undernourished; children fed mostly from left-over fruit and vegetables from the father's fruit wagon. It was rather a hopeless picture. Daily instructive visits continued indefinitely would have been necessary to get that little woman to understand the cooking of the right kind of food for those children. What could we do? The school diet sheet? It had been tried, the simplest of food picked out and the cooking of it explained, but of no avail. At last a plan unfolded: the oldest girl, A——, not quite eleven years, did most of the cooking. Why not make use of the domestic science class?

SOLVED

A—— was in a very junior class, but her teacher was spoken to and consented readily to have her attend the cooking class if it could be arranged. The domestic science teacher was then spoken to. "Certainly, she would take the child and give her particular attention." But this wasn't all. The principal of the child's school had to be asked. Next, the permission of the principal of the school in which the cooking class was held—from that to the Chief Inspector of Schools—until one began to sympathize with the "Old woman and her pig," and to feel that there were a great many obstacles in the way. However, arrangements were finally made and A—— is now attending cooking class, arrayed in white apron and cap. It was a very bright, smiling face and sweet voice that said, the other day, "We made shepherd's pie at cooking class to-day, and I'm going to make one for them at home to-night."

M. E. GARDNER.

It has well been said that the arch-flatterer, with whom all petty flatterers have intelligence, is a man's self.—BACON.

Editorial

Among the reports sent in for publication in the magazine this month is one from the Public Health Committee of the Association of Registered Nurses of the Province of Quebec. The entire report was somewhat condensed, but the striking point about it was the strong emphasis laid on the great value of the general open meetings for all members of the association. The paragraph reads: "This co-operation between the Public Health group and the general body of nurses indicates the most desirable trend in the nursing profession. While specialized groups need to meet together to discuss their own particular problems, it would be disastrous if any one group became isolated from the interests of the whole." Disastrous indeed if we ever get to the state of mind when we do not recognize the close interknitting of all branches of the nursing, and the need for general discussions of all these in general nursing meetings made of up workers in all the various fields of our profession. No one branch of nursing can afford to stand aloof, but every effort made to show the need for a better understanding of the public health requirements of our people in the training school and among the private duty nurses.

* * * *

The attention of all hospitals is drawn to Hospital Day, May 12th, 1923. The preparations which are now being arranged will surely bring hospitals and their needs to the public. Hospitals in Ontario and British Columbia are among the Canadian hospitals which have either asked the Hospital Day Committee for suggestions for a programme for this third Hospital Day or have themselves given suggestions for the help of the committee. While showing the best points of hospitals to visitors, and the need of further assistance in enlarging or better equipping of them, all those interested in the nursing in them should make it a point to stress the needs of the nurses. In far too many cases the poor accommodation for the students and staff is carefully kept in the background, the lack of teaching and laboratory equipment never mentioned, and, in short, the educational aspect and the fact that there is a school in connection with the hospital never suggested. Until the training school heads and those interested in the education of our nurses—and súrely this means every citizen in the community—take a determined stand to make the school what it is supposed to be, a technical school for the education of our young women so that they may be taught to care for not only the sick in our country, but preventing illness and suffering in the community by health work, these same conditions will continue.

Let us not, then, in our anxiety to interest the public in our hospitals, forget that the groundwork of all hospital success is the nursing, and let us remember the needs of the nurses and their education.

* * * *

Among the scholarships offered to nurses, quite a unique one, for this country at least, is the one offered by the *Trained Nurse and Hospital Review* of New York. It is a two-hundred-dollar scholarship offered to nurses graduating from accredited schools between July 1st, 1922, and July 1st, 1923. She may choose the field in which she is most interested, and take the course in one of the colleges or universities of the U.S.A. The award, according to the donor, will be made by a scholarship committee comprised of representative nurses on the following basis: The standing of the applicant in her class; her standing among other graduates of the State as represented by State Board averages; and estimate of fitness furnished by the applicant's superintendent of nurses; estimate of fitness based upon the committee's grading of a 3,000-word thesis on phases of the subject in which the applicant desires to specialize. This scholarship is open to Canadian nurses from Canadian hospitals whose eligibility comes within the regulations of this basis. Superintendents of nurses and eligible applicants may communicate with the editor of the *Trained Nurse and Hospital Review*, New York, concerning details of the competition.

PRAYER FOR A NURSE

Oh, my God: I am about to begin the day's work in the hospital. Teach me to receive the sick in Thy name. Give to my efforts success, sweet Jesus, for the glory of Thy Holy Name. It is Thy work; without Thee I cannot succeed. Grant that the sick Thou hast placed in my care may be abundantly blessed, and not one of them may be lost because of anything that is lacking in me. Help Thou me to overcome every temporal weakness, and strengthen in me whatever may enable me to bring the sunshine of joy to the lives that are gathered round me day by day. Make me beautiful within for the sake of Thy little ones and those lives which will be influenced by them. Amen.

A propensity to hope and joy is real riches; one to fear and sorrow, real poverty.—HUME.

To be a man's own fool is bad enough; but the vain man is everybody's.—PENN.

The World's Pulse

By Elizabeth Robinson Scovil

U-Boat Seaplane

The Germans have recently invented a seaplane designed to act as eyes to the submarine. It takes to pieces in small sections and fits into a water-tight metal tube, which can be lashed to the deck of a submarine and does not impede its evolutions in any way. It can be made ready for use in less than five minutes. Equipped with wireless, it can communicate from the air with the submarine and direct its activities against food ships and war craft. French air experts attach great importance to the development.

The Dye Industry

British makers are now able to produce, with very few exceptions, all the dyes made in Germany. The British Dyestuffs Corporation produce 1,250 types of dyes, more than any single German firm ever made. They have an increasing trade with India, Japan, and China.

News 400 Years Old

A constellation in the southern hemisphere has suddenly increased in brightness from the second magnitude to the first. Astronomers think the change was caused by some internal commotion. This star, Beti Ceci, is more than 2,350 million miles from the earth. Even with the rapidity with which light travels, it would take 400 years for it to reach the earth from the star; therefore the occurrence which increased its brilliancy took place in the reign of Henry VIII., and is just visible here for the first time.

Increase in Radio

At a radio conference in Washington, called by Secretary Hoover, it was stated that a year ago there were sixty broadcasting stations in the United States; to-day there are 588. It was then estimated that there were between 600,000 and a million receiving sets; to-day it is believed there are between a million and a-half and two million and a-half persons listening in. Public broadcasting has practically been limited to two wave lengths, creating great confusion. The wave lengths from 600 to 1,600 metres is reserved for Government use; it is proposed that some of these wave lengths be turned over to the public.

The High Cost of Dying

The Jewish community of Warsaw are compelled to pay excessively high burial fees. At the Gemsha cemetery the cost is 300,000 marks, and at the Prague cemetery 50,000 marks.

Nuns Displace Nurses

The Vienna hospitals were forced to close for a time when the non-medical personnel at each institution walked out in protest against the replacement of nurses by nuns at the hospital for Government employees. It was necessary for all persons, except patients and nurses on duty, to get their meals outside the hospitals. Employment of the nuns was decided upon as a measure of economy.

Indians Claim Back Rent

The Caldwell Indians at Brantford, Ontario, are trying to collect 900 bushels of Indian corn, the rent for 150 years of Pelee Island at the rate of six bushels a year. They say they leased the island to an Indian agent about 1760 for 999 years. They are now negotiating with the Canadian Government for the back rent and for the establishment of a reserve. Walpole Island, Lake St. Claire, is suggested as a suitable reserve, there being about 10,000 acres of arable land in it.

How Obelisks Are Erected

It has long been a matter of wonderment how the Egyptian obelisks were put in place without the aid of a windlass, block and tackle, or other modern appliances. The removal of an obelisk in the present day has always strained the apparatus used almost to the breaking point. Mr. Rengelbach, chief inspector of antiquities in Upper Egypt, has reconstructed the method which he believes was used in putting in place these large monuments, some of them weighing over 500 tons. A high, sloping brick embankment was built around the site of the obelisk. At its highest part began a huge funnel of earth, sloping down to the pedestal of the obelisk. The great monument was hauled to the mouth of the funnel by man power; sometimes 10,000 men were engaged. The base was inserted in the mouth of the funnel and slid, or was pushed, down to the pedestal, where it was pulled upright.

A Skyscraper

Toronto is to have the highest building in the British Empire. The Canadian National Railway is to erect an office building on the corner of King and Yonge Streets that is to exceed in height the Royal Bank Building in Toronto, now the tallest structure in the Empire.

Soviet Russia

Communistic rule in Russia does not seem to have brought the promised millenium. In Moscow an enormous number of homeless children parade the streets. The growth of unemployment, the collapse of the schools, and the degradation of public morality have left them to their devices. They are literally compelled to keep themselves alive by any means in their power. Their parents are dead, ill, or too poor to provide for them, and they wander at large. Many of them are corrupted and turned into criminals. Two thousand houses in Petrograd are completely destroyed; it has been decreed that all unemployed shall leave the city.

News from the Medical World

By Elizabeth Robinson Scovil

Fat Soluble Vitamena

It is stated that cod liver oil contains 200 or 300 times as much of the fat soluble vitamen as butter. Minute doses of cod liver oil are recommended for women nursing children who do not seem to be thriving. In the case of a baby six weeks old, whose growth seemed to be arrested, the mother took a tablespoonful of cod liver oil three times a day. The infant immediately began to thrive, although the mother's milk had always had normal fat content previous to the treatment.

Obstetric Examination by Rectum

In a recent analysis of 750 obstetric cases, a high temperature was recorded in 206 per cent. of those examined by the vagina, and in only 68 of those examined by rectum alone. An authority states that, of the thirteen points to be determined by examination, eight can be ascertained through the rectum as well as through the vagina, with much less danger to the mother.

Chaulmoogra Oil Derivatives in Leprosy

Thirty-seven patients on the Island of St. Croix were treated with the ethylester derivatives of the fatty acids of chaulmoogra oil, given intramuscularly into the buttocks. The nasal soular was positive for *Bacillus leprae* in twenty-three of those who received the treatment. As a result, it is believed that it will cure some cases, especially those of relatively short duration, in less than five years. It will bring about improvement in a majority of patients to such an extent as to permit their parole. No harmful effects have seemed to follow its administration.

Reforms in Mental Hospitals

An English physician, Dr. Lomax, has severely attacked the administration of mental hospitals. The commission appointed has made several recommendations, among which are: to provide patients with occupations, and, as far as possible, rouse their interest. It is desirable to provide letter-boxes in which patients can post their letters. In every ward notices should be posted informing patients of their right to forward letters unopened to the authorities. The question of authorizing payments to patients for work is under consideration. Notices should be placed in the waiting-rooms to inform friends and relatives of the patients of the provisions of the Lunacy Act impowering them to apply for the discharge of a patient.

Catharsis of Nursing Mothers

So many of the cathartics taken by the nursing mother affect the child, that the following suggestions will be found useful when constipation is troublesome: A coarse diet, with fruit and vegetables predominating, is indicated, and abundance of water should be taken. Bran, one tablespoon three times a day with meals, is good, if there is no inflammatory condition of the intestine. Liquid petrolatum, one tablespoonful, morning and evening, will soften the stool and help its passage. Abdominal massage is advised, and, as a last resort, enemas of soapsuds, or saline solution.

Condensed Milk Regulations

The British Ministry of Health has made new regulations as to the labeling and composition of condensed milk. Every can must have a label specifying its contents, and "full cream" or "unsweetened." Condensed skim-milk must be labeled "unfit for babies." Any instructions as to dilution must be quantatively correct. Condensed milk must contain a stated percentage of milk-fat and solids.

A New Element

Dr. Alexander Scott, of London, has isolated a new element called naferium, a cinnamon-colored powder. In 1913 he received from New Zealand samples of black sand for analysis, from which he extracted a cream-colored sand containing 75 per cent. magnetic oxide of iron and 25 per cent. litanium, of a highly refractory residue, which he named the new oxide and which prolonged investigation proved to be the new element.

Typhoid Fever Rate

The annual summary of the typhoid death rates shows a continuance of the decline in typhoid which has been in progress during the last twelve years. The astonishing rate of 3.15 per each hundred thousand has been reached, a little less than one-sixth of the rate in 1910. The rural death rate from typhoid last year was nearly double that of the large cities. The two great agencies of dissemination of typhoid are polluted water supplies and raw milk. Lesser ones are the improper disposal of excreta, bathing in polluted water, and contaminated shellfish.

To Break the Curd in Cow's Milk

Many babies can digest raw cow's milk. When they cannot, the formation of large protein curds is obviated by boiling the milk from two to three minutes over a flame, or, better, by putting it in a double boiler and heating it until the water in the outside boiler boils for eight minutes. A small double boiler should be used, as in it the column of milk is deep and has a small surface. The milk should simmer rather than boil, as it undergoes less change in taste and there is less loss of soluble protein, fat, sugar and salts.

The Canadian Medical Association

The annual meeting of this association will be held in Montreal in June, under the presidency of Dr. Arnot, of London, Ontario. The association has been investigating the possibility of establishing a college of surgeons in Canada.

"THY WILL BE DONE"

What should I ask of Thee, dear Lord,
Thou who hast boundless gifts to give?
Light of genius Thou could'st afford
To me, the longest day I lived.
A mind to strive my kind to serve,
To remedy this erring world,
And from this purpose never swerve
Till folly from her throne was hurl'd.

Give me the power—mankind to move,
Sorrow's pathway—the course of sin,
Supplant by joys—let grace approve
The longings of my soul begin;
Tears of pain I would brush away,
Which oft from aching hearts are wrong,
And for the sinner's soul I'd pray,
That Jesus' sweetest song be sung.

This world of error, blindless sin,
Is not of Christ's unfinished making.
He gave to man to strive to win,
The light of love from Heav'n breaking.
Then why should will to earth be sworn,
Love and will to earth be given?
Is loss no cross?—it's sad to mourn—
Oh! Christ forbid the loss of heav'n!

Pardon, sweetest dear Lord of love,
Thy child's erring, thoughtless dreaming.
Oh! yes, Thy priceless gifts above,
On me are ever, ever teeming;
Thou hast on me a gift bestow'd,
Thy image stamped upon my soul,
And written on my heart the code,
Love, obey,—see Christ point to the goal!

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The General Practitioner and the Health Centre

By Arthur B. Chandler, M.D.,

Medical Director Child Welfare Association, Montreal.

When we realize that the health centre has come to stay and that the present day general practitioners have graduated prior to the public health propaganda of to-day, we may well stop to consider how the education of the medical men may be brought up to date in this particular. Probably very wisely the Canadian doctor is conservative, and even now there are doubts as to the benefits to be obtained from health centres. This is not to be wondered at when one considers that for many years medical education has been dominated by pathology. More stress has been laid on what an organ looks like when damaged than what it is good for or how we can make the best use of it. Generally speaking, until quite recently our education on heart disease has been almost entirely confined to the pathology of the damaged heart. The tendency of to-day

is towards finding out what that heart can perform regardless of what valves are diseased. Similarly the student for years has been taught how to feed a "bottle baby," but little time has been devoted on how to prevent "bottle babies." It is here that the education of the doctor should begin.

The aim of the health centre, first, last and all the time, must be educational. Wherever this idea is departed from the value of the work is at once diminished. The people to be educated are primarily the mothers of the children, but, while of secondary importance, yet never to be overlooked, are the public health nurses, the local doctors and the general public. If more zeal were devoted to the education of the doctor, the path of the public health nurse would be easier.

It is but natural for the family doctor to at first look with suspicion at the advent of the health centre. He cannot help but wonder whether it will cut in on an income none too large for a comfortable living. No matter how enthusiastic one is for state assistance, it is never welcomed in competition with our own particular work. The union labor resents prison labor competing with it, as it tends to glut the market owing to the state assistance.

The family doctor must be approached and won over by showing how the health centre is intended to do work that he has never done. He has taught the public how to get well rather than how to keep well. His mind has been kept so long in the groove of the pathological that he cannot think in the terms of the normal. When the health centre is pictured to him as a place to educate mothers how to keep their children well, his suspicion is soon turned to approval and the work is welcomed. The family doctor loses a certain income from feeding cases, but more than makes up by treating acute conditions that might otherwise be treated at home without medical assistance. It is here that the health centre is a business-getter for the doctor when the least sign of illness develops. Should the centre treat sick babies, it at once deserves the resentment of the doctors who rely on this work for their living.

The success of the centre at once interests the active practitioner, and it is here that the educational value comes in. Should he wish to work in the centre, the opportunity should be given him. He should then be put in touch with the latest works on the care of children, especially those dealing with prevention rather than cure. He must revise his ideas on the importance of breast feeding, but especially on the results that can be obtained in maintaining and re-establishing the milk supply of the mother. Too much stress cannot be laid on this feature, as breast feeding is the great preventive measure in the fight against disease in childhood and possibly in adult life.

When a new centre is to be opened, the physicians in the district should be either called on individually, or invited to a conference where the plans can be laid before them. The health centre physicians should either be brought from another part of the city, or a rotating service

among the local physicians may be established. It is a mistake to give one local physician an appointment that excludes the others who wish to help. Jealousy may in this way be prevented, and, at the same time, a spirit of competition results in the work which is always good for the centre.

Regular conferences of the doctors engaged in this work should be held. In this way many ideas and successful measures are brought to the attention of all. It is surprising, too, how soon an esprit-de-corps is developed which soon results in a waiting list for appointments to the centres. In large cities these conferences may be opened to all the physicians in the vicinity, and it is surprising how many will take advantage of them if the programme is carefully prepared.

The pre-natal work may be arranged in the same way. There is room for as much improvement in obstetrical work as in the care of infants and children. The physician has never been able to teach women that they need early and frequent advice during pregnancy. It is still widely considered a natural undertaking which every woman is endowed at birth to go through with in the best way. Much is known already about the care the expectant mother needs, and probably much more will be known in the not distant future about her diet and life in order to produce the best offspring. The mortality rate of both mother and child is still far too high and shows small reduction as the years go by. The insufficient training of the doctors must be assisted by every possible means. The health centres may encourage the local physicians to improve their knowledge of obstetrics and may also stress the needs of education as to the necessity and possibility of breast feeding for every mother. It is here that the mother has relied too much on improper advice.

Our knowledge of the pre-school child is still very limited. Here we can help the practitioner by bringing the dental surgeon, the orthopedist, and the mental hygienist to the conferences. Their special work has never had the important place it should have in teaching medical students and the public about the care of children. Their presence at the conference of physicians provides new material that is sadly needed.

The Place of the Team Demonstration in a Public Health Programme

A new feature in health educational work was begun last summer, when team demonstrations in "home nursing" and "care of the baby" were organized in connection with the boys' and girls' clubs. The boys' and girls' clubs are organized by the Extension Service of the Manitoba

Agricultural Department for the purpose of stimulating a greater interest in farm life. Teams consisting of three members are selected to demonstrate one of the household arts, e.g., bread-making, sewing, etc. These teams are then divided into districts for competition by the Extension Service. When the teams are prepared to demonstrate, a judge is sent out through the province to score each team. The team receiving the highest marks in each district is then afforded the opportunity of a visit to Winnipeg, during the first week in September, to demonstrate in the final competitions which are held at the Board of Trade building. While in Winnipeg, the boys and girls live at the Manitoba Agricultural College under the supervision of the Extension Service. Medals are awarded the winning team in the final competitions by organizations, merchants and firms who are interested in the promotion of the various demonstrations.

The team demonstrations in "care of the baby" and "home nursing" were first planned as a means of making the work of the Junior Red Cross known, and were therefore made possible through the co-operation of the Provincial Board of Health, the Extension Service and the Junior Red Cross Society. The public health nurses selected the teams from their Little Mothers' Leagues, and trained them according to the outlines prepared by the Nurses' Department.

Thirty teams were enrolled, and these were divided into six districts, three districts demonstrating "care of the baby" and the remaining districts demonstrating "home nursing." The six teams and their leaders (the public health nurses), winners in their respective districts, who came to Winnipeg and took part in the provincial competitions, were: Carman team, Miss A. Hollingsworth, leader; Gladstone team, Miss R. Vidal, leader; Minnedosa team, Miss J. Stothart, leader; Warren team, Miss C. J. MacDonald, leader; Morden team, Miss G. Hall, leader; Virden team, Miss A. Stewart, leader.

The teams wore the emblems of the Junior Red Cross Society as a means of impressing their audiences that they represented a junior branch of a world-wide organization which is helping to strengthen the organized forces in public health work. And there is no doubt that they did create an impression by the interest aroused in Junior Red Cross work.

Mrs. H. M. Speechly, superintendent of the Manitoba Junior Red Cross Society, and Miss M. Martin judged the teams during the final competitions, and the prizes were presented by the Junior Red Cross Society. Gold medals were awarded to the Carman team, and to the captain of the Minnedosa team (Miss Lily Beddome), who won the prize for individual work.

As this is the first time that these demonstrations were introduced into club work, they were more or less in the nature of an experiment. The experts in team demonstrations who were present from Minnesota and Iowa specially commended the work.

As the work was an entirely new field in public health nursing, it all meant a great amount of effort on the part of all the nurses who trained the teams.

In addition to the competitive demonstrations, the teams have demonstrated in many places in their own districts, and through their own enthusiasm have done much to arouse an interest in the public health programme of the Board of Health—thus showing the possibilities for publicity in public health work, as well as the educational value of placing health subjects before the public in a popular way.

Unfortunately the "Outlines for the team demonstrations and suggestions for conducting them" are too lengthy to be given here, but further information may be obtained from the Public Health Nurses' Department of the Manitoba Provincial Board of Health.

ANNA E. WELLS, R.N..

Red Cross Classes in Home Nursing in British Columbia

By ANNA MAYBEE STABLER, R.N.,
Director of Nursing,
British Columbia Division, Canadian Red Cross.

Probably there is no province in Canada so greatly in need of home nursing instruction as British Columbia—in its rural districts. There is no other province carrying on this work as extensively.

The province is sparsely settled, excepting through the southern part, on Vancouver Island, and along the north shore of the Pacific Coast. Transportation is difficult, because the chain of mountains, which is a never-ending source of changing beauty, but which makes life difficult for the settlers in more ways than one.

It might not impress one as being a great hardship to live one hundred miles from medical aid, if the roads were good and an automobile were at hand. The situation confronting many of our settlers is often a very serious one, when accident or illness occurs, because of transportation difficulties in getting the patient to a physician, and because valuable time may be lost before medical aid can be obtained; furthermore, calling a physician from a great distance is usually out of the question, because of the necessarily heavy fees charged.

These are the chief reasons why this division of the Red Cross is vigorously pushing the organization of classes in home nursing in the rural parts of the province.

The public health nurses on our staff have conducted home nursing classes as one of the phases of their service, but the number of our nurses is pitifully small when one considers the vast stretch of country.

We employ travelling instructors, who are sent to certain districts to conduct the course in home nursing. These instructors must be qualified as organizers and teachers, and we aim to employ those who have had public health training. The organization of the classes must be undertaken by the instructor after her arrival in the district, although, preceding her arrival, we push publicity and aim to have the local organizations stimulate interest in the classes. The organization of ten classes to be held once a week, or five classes twice a week, calls for addresses to be made before various organizations, and interviews to be held with local leaders, in from five to ten different centers. We have a set of slides on home nursing which helps to stimulate interest. The clergymen are usually strong allies of the instructor.

The instructor uses a Ford car. Her classes are held at 3 and 7 p.m. daily. There are certain times of the year when it is not feasible to hold classes, in many districts. The roads in the newly settled parts of the interior are impassable for a Ford, and often difficult for a horse and cutter, during the winter. During the fruit season, viz., from the middle of June until the first of October, the women are too busy to attend classes. Fruit ranching is carried on extensively, and the women help in picking and packing. These exceptions leave only spring and fall for class work in many parts. Those who enroll keep up their attendance remarkably well. Often they have to travel several miles. The classes for these women, who are often weary from actual labor, consist largely of demonstrations. The examination consists of verbal questions and demonstrations, and each one is examined privately. A written examination would cause many of these women to refuse to enroll.

Our instructors are supplied with suit-cases, which are packed with equipment for class work. Articles which are not easily transported are supplied in the neighborhood. The articles found in the homes are used as far as possible, as they would have to meet the need in case of sickness. We aim to show ideal articles for sick-room use, but demonstrate the making and use of substitutes, which can often be found in a rancher's home.

The knowledge gained through the course is especially valuable to women in the isolated country districts; however, we are busy during the winter with class work in the cities. As a result of publicity concerning our home nursing classes, during the fall fairs in Vancouver and New Westminster, many requests were received for classes to be conducted in the cities. In October we enrolled 108 women in Vancouver, with a class held each evening, excepting Saturday. Closing exercises were held for these classes on February 2nd, and six new classes were started on February 5th.

Such a fine class spirit developed in some of the classes that they refused to disband, so they will take up definite volunteer work for the Red Cross. Several of the members asked whether the Red Cross had not another course which they could take up, "dietetics" being especially requested. A series of health talks has been planned for one of the classes, by request.

The women enrolled in the cities from various walks in life, many being teachers (including domestic science), bookkeepers, stenographers, telephone operators, saleswomen, factory-operators, waitresses, and mothers at home. In age they range from 18 to grandmothers. It is interesting to see how the old type of grandmother, who found nothing to learn about the care of children, is being superseded by the type that is more pleased than anyone in the class "to be able to bathe and dress a baby in nine minutes without turning it once!"

Our new city classes which are being started this week are held in Vancouver, with the exception of one, which is held in the Technical School, New Westminster, as an extension of the night school.

One of our classes consists entirely of the wives of soldier pensioners, who are members of a club.

In addition to our regular classes, with an enrollment of 100, we are giving a short course to the Girl Guides (second class) of Greater Vancouver, in order to enable them to qualify for their badges. We hope these girls may take the complete course later.

Our enrollment fee is $2.00, but the Red Cross never refuses to enroll a woman because of inability to pay the fee. Our city classes are self-supporting, but our country classes call for a heavy expenditure; however, the Red Cross feels that the dissemination of knowledge on home nursing (which includes hygiene and care of the baby) to all women, and especially to those who are long distances from medical aid, is one of the most important activities of the peace-time programme—in this province, at least.

One of the interesting "by-products" of our city classes has been the stimulation of a desire in several of the members to take the three years' course in professional nursing, which has resulted in more recruits for the profession.

The Public Health Nurse, the official organ of the National Association of Public Health Nurses in the United States, pays a very pretty compliment to public health nurses in Canada by publishing in the current number of that journal a symposium of three papers which were read before the Canadian Council of Child Welfare in Toronto last September.

The discussion in this symposium centred on "Attacking Infant and Maternal Mortality." The following papers read are published:

1. "In a City. The Halifax Experiment," by Jessie L. Ross, R.N., Chief Nurse, Massachusetts-Halifax Health Commission, Halifax, N. S.

2. "In Rural Districts," by A. Wells, R.N., Acting Superintendent, Nursing Services in Manitoba, Canada.

3. "In Pioneer Stretches," by S. M. Carr-Harris, Provincial Nurse, Province of Ontario, Canada.

Annual Report of the Public Health Association, Quebec Province

The Public Health Committee of the Association of the Registered Nurses of the Province of Quebec, in their annual report, show that the interest in the Public Health section of the C.N.A.T.N. is on the increase.

It is interesting to note that during the year three open meetings were held with the Canadian Nurses' Association of Montreal, at which the Public Health Committee were responsible for the programme. Several excellent papers were given on different phases of public health work that are of interest to all nurses, and were much appreciated by the whole group. This co-operation between the public health group and the general body of nurses indicates a most desirable trend in the nursing profession. While specialized groups need to meet to discuss their own special problems, it would be disastrous if any one group became isolated from the interests of the whole.

It's best to keep a-smilin',
For a smile's a kind o' net
That catches by beguilin'
Jest the things it wants to get.
So keep your smile a-spreadin'—
Crack a jolly joke or two—
An' you'll find that things come headin'
Straight for smilin' folks like you.

A fool always finds some greater fool to admire him.—BOILEAU.

Flowers are love's truest language.—BENJAMIN.

Private Duty Nursing Department

Secretary-Treasurer—Miss Bertha M. Fife, 320 Roncevalles Avenue, Toronto.

National Convenor—Miss Edith Gaskell, 397 Huron St., Toronto.

Convenor Press Committee—Miss Clara A. Brown, 86 Avenue Rd., Toronto, Ont.

Nova Scotia Representative—Miss Josephine Walsh, 41 Brenton St., Halifax, N. S.

Quebec Representative—Miss Florence Thompson, 165 Hutchison St., Montreal, Que.

Ontario—Miss Helen Carruthers, 12 Selby Street, Toronto, Ont.

Manitoba Representative—Miss Henrietta Sykes, 723 Wolsely Avenue, Winnipeg.

Saskatchewan—Miss Helen Cameron, 717 Dufferin Ave., Saskatoon, Sask.

Alberta Representative—Miss Agnes Kelly, 457 Twelfth St. N.W., Calgary, Alta.

British Columbia Representative—Miss Marion Currie, 2707 Hemlock St., Vancouver, B. C.

Report of Private Duty Committee of the G. N. A. O.

The Private Duty Committee of the Graduate Nurses' Association of Ontario have pleasure in presenting its second annual report on this the 20th anniversary of the Graduate Nurses' Association of Ontario. Looking back over these years, some of those present will recall that it was the private duty nurses who started this organization, and they have reason to be proud of the success which has attended their efforts.

At this time last year we had under consideration the question of insurance, chiefly sickness and accident, for nurses. This is now an accomplished fact, and we feel that it is one of the greatest undertakings on behalf of the members of our profession. Although all the nurses have not yet seen the wisdom of taking out an insurance policy, still we are pleased with the comparatively large number who have, and those who were unfortunate enough to be ill during this past winter have been more than satisfied with their investment and are the best advertisers of insurance. Heretofore, when nurses were ill, few, if any, could feel that they were able to collect any remuneration for their enforced time off duty, and many anxious moments were spent figuring out the cost of their illness. This is now a thing of the past to all who will but look a little ahead. Many of our profession are called upon to help support aged parents or younger members of the family, and, if no provision is made in case of sickness or accident, these dependents suffer.

Among the few insurance companies which will issue sickness and accident policies to women, the Continental Casualty Company of Chicago

presented the most popular form of policy, and the committee decided to recommend this company to the nurses. A few nurses, however, have taken out policies in the Yorkshire and the Toronto Casualty and Marine Company. The following is a statement to date from Mr. Flaska, agency supervisor:

"Since last June approximately three hundred and fifty nurses have bought accident and health insurance from the Continental Casualty Co., and outside of Toronto, but in the Province of Ontario, approximately three hundred, making a total of about six hundred and fifty.

"Approximately eighty claims were paid, fifteen of which amounted to less than twenty-five dollars, forty between twenty-five and fifty dollars, fifteen between fifty and one hundred dollars, three between one hundred and one hundred and fifty, and eight over one hundred and fifty dollars. At the present writing there are thirty-seven nurses who are sick and have not yet returned to work."

The question of annuities was also before the committee. The Royal National Pension Fund for nurses, of England, was investigated, and we thought possibly we might enter this fund, but we learned it is open only to graduates of the British Isles. We decided to turn to our own insurance companies, and Mr. May, actuary of the Sun Life, was consulted. He worked out a pension scheme which is superior to that of the Royal National Pension Fund. We wondered if the Dominion Government would be willing to provide a pension for the members of the nursing profession, and decided to enquire. Through the kind assistance of Dr. Helen MacMurchy and Mr. Irving Cameron, Mr. Bastedo, Superintendent of Annuities at Ottawa, was consulted, and, although very sympathetic as to our scheme, he feared the Government, which was already overburdened with just such demands, would be unlikely to consider us at all. However, he promised to bring the matter before the Minister at as early a date as possible, and in a few weeks' time we had a pension proposal from the Minister at Ottawa much more favorable to us than that of the Sun Life. The various details of the two proposals are given in the September issue of the *Canadian Nurse*, and I believe a printed copy of the Dominion Government scheme was mailed to each nurse in the province. Just how many nurses have taken advantage of this method of saving we cannot say, but the rates are good and the investment sure.

To the Toronto nurses must be given the credit for supplying the contribution each month in our section of the *Canadian Nurse*. However, we feel that during the coming year the private duty nurses from other cities and towns will assist us, so that the responsibility will not rest on a few of us in one place.

Several articles have been promised us by men prominent in the various branches of the medical profession, and we hope that our page may attain a standard of excellence.

We have endeavored to get in touch with each affiliated association, asking for one or more private duty nurses to be appointed to our committee. Out of a possible 56 we have received replies from 43 associations, and very many hoped to send a delegate to this convention. If they succeeded in doing this we should have an excellent representation from the province, and much good should result from our meeting together. With a little more effort we hope to arouse the interest of the thirteen associations who have not yet acknowledged our letters, and thus be in touch with each and every one.

At the Friday evening session Mr. W. J. Dunlop, of the University of Toronto, will speak on the "Short Term Extension Courses" and explain fully what the Private Duty Committee have in mind for two weeks this coming summer. We feel that very many of the nurses, not only in Toronto, but in various parts of the province, will be only too glad to take advantage of such a course as offered by the university. In connection with these classes the superintendents of the four university hospitals have been consulted *re* the giving of special clinics to the nurses at such time. In each case our request was received most kindly, and we were promised every assistance possible in making our first summer course for private duty nurses a success.

From time to time emergencies arise in various parts of our country, and during the present epidemic of typhoid fever in Cochrane no less than forty-nine nurses from the Central Registry, Toronto, have responded, and others are willing to go if necessary.

All of which is respectfully submitted.

HELEN CARRUTHERS,
Convenor.

Read at Annual Meeting of G.N.A.O., Peterboro, April, 1923.

IF YOU ARE OBESE, SHRINK YOUR STOMACH

Your stomach, long having been used to caring for more food than your system needed, is enlarged, and when you eat moderately there are the wide open spaces longing to be occupied. That is why you still feel hungry and unsatisfied.

Now if you will go on a three-day liquid or fruit diet, not totalling over 500 or 600 calories a day, this will reduce it to its normal size, and very much less food than you have been used to will satisfy you. Then you can easily go on your reduction diet as though it were a feast.

For these shrinking days I advise about 100 calories every two or three hours during the day. You will lose from five to ten pounds during this period, and it gives you a glorious start. After that it is not wise to lose over two pounds a week.—LULU HUNT PETERS, M.D., in *The Health Builder* for November.

Pupil Nurses' Department

Essay on Nursing Ethics

By ENID GREENHAM,
Junior Nurse, Children's Hospital, Winnipeg.

There are numerous definitions regarding the word "ethics." It has been said to mean the science which teaches the right thing to do, think, or say, at the right time; but perhaps one of the best means of expressing the word may be found in the words of Christ, "A new commandment I give unto you, that ye love one another as I have loved you." These words may appear vague on first consideration, but, if one thinks for a moment, one feels that they contain, in brief, every possible rule applicable to the individual or to the mass. They represent our Lord's whole teaching; and what can be greater than His rules, if followed in the spirit in which He gave them?

By ethics, then, is included not only personal etiquette, but the moral relationship — the kindly, courteous, helpful spirit which should exist between men and nations.

In the above, ethics has been treated as a general term; let it now be considered as it affects the individual or group of individuals.

Every person possesses, in a greater or less degree, a certain code of rules which shall govern their lives. A group of people banded together will possess certain rules which will apply best to their own particular field, but in all will be found the common ideal, the management of their particular sect, as may best bring about the highest and most proficient work.

As an example, take the nursing and teaching profession; both are out for the good of humanity, but each must make their own "ethical" laws as will best fit their own particular sphere of action.

Let us consider "nursing ethics," or how best a nurse may carry on her profession so that its highest ideals may be attained:

First, what could be considered as essential qualifications for a nurse? Certainly a good character; a good general health, bodily, mentally and morally; cleanliness and neatness of personal appearance; as good an education as possible; and last, but not least, a teachable, self-reliant, willing spirit.

Having found individuals with some proportions of these essentials, it follows that we must make rules, or ethics, which shall govern them.

We will turn, then, to the training school and begin with the probationer.

A probationary period, and the early nursing course immediately following, is not easy; it presents difficulties all unrealized. Everything is all so very strange and unlike any previous life. Inwardly, the probationer feels somewhat like a piece of cord which is rolled and twisted, turned and ordered at the will of all, and set to obey a list of rules, which seem to rise up like mountains in the path and appear utterly ununderstandable.

The first great lesson the probationer learns is that of implicit obedience to all orders given by the physician, superintendent, or head nurse. Next, she must learn deference, honor, and loyalty to her officers; and last, but not least, the great lesson of professionality.

Obedience: As the nurse continues with her training, she realizes more and more the necessity for it. In a time of crisis, someone must direct; and in the case of a doctor's orders, attention to the merest detail may mean the life or death of a patient. A doctor's orders must be carried out promptly.

Deference, Loyalty, Honor: To the woman with a good home training, the first should present a little difficulty. The young nurse will be ready and willing to show the courtesy and respect due to her superintendent and officers, as, for example, addressing them rightly.

Honor means not only the honesty with which the nurse carries out her work and the faithfulness with which she obeys the doctors, but it applies to her personal conduct with her patients, in that she must never divulge anything which she may learn or which may be confided to her keeping.

Hand in hand with honor goes loyalty—loyalty to her superintendent, to her school, and to her fellows. A nurse's loyalty and respect for her superintendent can be expressed in no better way than by holding the honor of her school sacred, by trying to keep her uniform and all it means unsullied, both in and after training.

Professionality: To the beginner and young nurse it represents many difficulties. It implies that, while on duty, a nurse must never truly be herself; it implies the learning of self-control, unselfishness, strict attention to her patients, and forbids familiarity with anyone. It stands for obedience and sums up the whole nursing profession. An unprofessional nurse casts a slur upon her school, for unprofessionality breeds carelessness.

Lastly, a nurse must pay attention to the rules governing hygiene, or she will not be giving her best to her patients, or profiting herself or her school.

These general ethical rules apply to seniors and juniors alike. Great responsibility rests upon the senior, for the juniors will watch her closely and any defects will be quickly noted. They will assuredly govern their own conduct by hers. Therefore a painstaking, trustworthy professional

senior nurse will get the best results from her juniors, for they will rely upon her judgment, respect and honor her as she deserves.

Stress has been laid on the need for professionality. It is a quality often hard to acquire and decidedly hard to keep, for in a hospital, where all are more or less known to each other, "familiarity breeds contempt," and carelessness of behavior. A certain Bohemianism is bound to exist when off duty, and the nurse wants to be well disciplined and to carefully watch herself, or trouble is sure to come, for the senior nurse can never expect to direct successfully those with whom she is on familiar terms.

So far the pure and simple rules have been dealt with. Now let "ethics" be considered from another standpoint, from the point of view of humanity.

In nearly all training schools of to-day "History of Nursing" is taught, and through it the nurse may solve all her ethical problems. With help she will see how the principles and practice of nursing have been handed down, and thus will gradually come to fully understand the true worth of what were once "tiresome rules." She will read of noble deeds, of heroic, self-sacrificing work. From the study may be conned the high ideals of the profession and all it stands for.

The nurse will early learn, and be told, that it is her bounden duty to be ready to go anywhere, at any time, and to do anything.

No woman should enter the profession who cannot feel the soul and spirit of nursing behind the practical work.

All nurses will at some time or other come in contact with the miseries of humanity. Let one and all strive to bring to their profession a love for humanity which shall teach them to give of their best to those in need, not alone by practical help, but by example and by giving their knowledge where they see the need, that they may benefit not only those in immediate need, but the generations that are to come. Strive to shrink from no human creature, however loathsome; remember that the Creator loved them and sent a Son to die for them, who went about healing, teaching, and doing good.

If the young nurse can only learn this human sympathy, then the nursing profession will realize its highest ideals and be worthy of its pioneers. In the words of Mother Fleidner, "Never sacrifice the soul of nursing for the letter."

Let us say with Vincent de Paul, "They shall have no monasteries but the house of the sick, no cells but a hired room, no cloisters but the streets of the town and the wards of the hospital, no enclosure but obedience, and, for convent bars, only the fear of God; for a veil they shall have a holy and perfect modesty, and, while they keep themselves from the infection of vice, they shall sow the seeds of virtue wherever they turn their steps."

Department of Nursing Education

Conducted by the Canadian Association of Nursing Education

Programme of the C. A. N. E. Convention to be held at Toronto, June 6th, 7th, 8th and 9th.

JUNE 6—OPENING SESSION

2:30 to 5:30 P.M.

2:30—	1. Address of welcome; Minister of Education for Ontario.	20 min.
	2. Response; Miss Edith C. Rayside, Montreal.	10 "
	3. President's address.	20 "
3:20—	4. Report of Committee on Arrangements.	10 "
	5. Report of Committee on Programme.	0 "
	6. Minutes of last annual meeting.	
	7. Secretary's report.	
	8. Treasurer's report.	
	9. Correspondence.	
	10. Appointment of Committee on Resolutions.	
	11. Business arising from minutes, reports, and correspondence.	40 "
	12. Report of Committee on Membership; Miss G. Bennett, Ottawa.	5 "
4:20—	13. Report of Joint Committee of C.N.A.T.N. and C.A.N.E., appointed to bring in recommendations concerning the future policy of the organizations and membership of the C.A.N.E. and the future plans of co-operation of these two national organizations; Miss G. Fairley, Hamilton. (Discussion.)	60 "
5:15—	14. Report of Nominating Committee; Miss S. P. Johnson, Brandon, Man.	15 "
	Total - - - -	180 min.

THE UNDERGRADUATE STUDENT NURSE

JUNE 7—MORNING SESSION

9:30 to 12:30 A.M.

9:30— 1. Report of committee appointed to make a survey of practical work of the student nurses in the training schools for nurses, with special emphasis on special

training in tubercular, communicable diseases, and mental disorders; Miss E. MacP. Dickson, Weston. 60 min.

10:30— 2. Report of Venereal Disease Committee; Miss J. I. Gunn, Toronto. 15 "

10:45— 3. Report of Committee on Training School Records; Miss J. I. Gunn. 45 "

(Discussion by members of the committee from the point of view of the training school, organizations employing nurses, and the nurse herself.)

11:30— 4. Class-room equipment and facilities for teaching; Miss Nagle, Hamilton. 30 "

12:00— 5. Methods of maintaining the interest of the student in her patients; Miss Mary Martin, Winnipeg. 30 "

LUNCHEON

AFTERNOON SESSION

2:30 to 5:30 P.M.

2:30— 1. Report of Text-Book Committee; Miss F. M. Shaw, Montreal. 80 min.

(Followed by discussion of the relative value of text-books, lectures, practical demonstrations, conferences, and ward teaching.)

3:50— 2. Social and recreational interests of the student; Mabel F. Hersey, Montreal. 20 "

4:10— 3. Report of Y. W. C. A. Committee; Miss Muriel Martin. 60 "

(Discussion.)

5:10— 4. Interesting the student nurse in her alumnae association; Miss Elizabeth Flaws, Toronto. 20 "

(Discussion.)

JUNE 8—THE GRADUATE NURSE

9:30 A.M. to 12:30 Noon

9:30— 1. Report of Committee on Scholarships, including a statement of the present university courses for graduate nurses; Miss E. K. Russell, B.A., Toronto 60 min.

(Discussion—Miss Moag, Victorian Order of Nurses, Montreal; Miss Panton, Hospital for Sick Children, Toronto; Miss A. L. Campbell, Provincial Board of Health, Toronto.)

10:30— 2. Staff conferences in the training schools; Miss K. W. Ellis, Vancouver, B. C. 30 "

11:30— 3. Refresher courses for private duty nurses. (Member to be suggested by Miss Gaskell.) 30 "

11:30— 4. Summer Institutes and part-time courses for public health nurses. 30 "
(Discussion led by Miss Harriet T. Meiklejohn, St. John, N.B.)

12:00— 5. The need for hospital post-graduate courses in Canada; Miss Georgina Rowan, Toronto. 30 "

LUNCHEON

AFTERNOON SESSION

2:30 to 5:30 P.M.

Report of the Committee on Nursing Education, appointed by the Rockefeller Foundation. Discussion organized by Miss E. I. Johns, Vancouver, B. C. 180 min.

Conclusion 6. Reduction of course to 28 months.
" 7. Special training of superintendents, supervisors, etc.
" 8. Development of University Schools of Nursing.
" 9. Establishment of subsidiary grade of nursing service.
" 10. Finance in schools of nursing.

JUNE 9—FINAL BUSINESS SESSION

9:30 A.M.

Unfinished business.

Elections.

Resolutions, etc.

WESLEY'S RULE

Do all the good you can,
By all the means you can,
In all the places you can,
At all the times you can,
To all the people you can,
As long as ever you can.

The saddest thing that can befall a soul is when it loses faith in God and woman.—ALEXANDER SMITH.

Hospitals and Nurses

QUEBEC

Montreal General Hospital

Editor's Note:—The following items were printed by mistake under the heading of Toronto Western Hospital in the March issue. The mistake was discovered too late for insertion in the April issue:

Miss Bertha Smith is doing social work in New York City.

Miss DeBarr (1923) has been taken on the staff of S.O.R. at the Montreal General Hospital.

Miss Elsie Gruer (1917) has accepted a position on the staff of Highland Hospital, New York City.

Miss A. M. Cooper (1912) has gone to the Binghampton Hospital, Binghampton, N. Y., as dietitian.

Miss Sara Fraser, who for some years has been industrial nurse at Goodwin's Ltd., Montreal, has resigned her position for private nursing.

Miss Mary Peters (1919) has resigned her position in charge of the Montreal Dispensary for private duty.

Miss Agnes McPhie (1919) has resigned her position at Grande Mere Hospital, and Miss Grace Mackay (1922) has accepted a position in the same hospital.

Misses Clara McCrea (1922) and Libbie Aird (1922) have accepted positions in the Porchester Hospital, Porchester, N. Y., the former in charge of case room and nursery and the latter in charge of surgical wards.

Miss Marie Buss (1922) has relieved Mrs. J. Dunwoody (1918) in charge of the public ward floor in the M.G.H., while the former takes an extended trip to the Mediterranean.

Western Hospital, Montreal

A most interesting and instructive lecture, illustrated by lantern slides, was given in the Nurses' Home by Dr. MacEachran on Victorian Order Nurses' Work.

Miss Phelan has returned to the city after a three months' visit to Chicago.

Miss Kelly (1920) has resigned her position in New York and is now engaged in private duty.

Miss Marion Nash (1910) has been appointed supervisor in the Maisonneuve District, Victorian Order of Nurses, Montreal. Miss Nash is a graduate of McGill, Class 1922.

Miss Ethel Mount has resigned her position at the Red Cross Lodge, McTavish Street, Montreal.

Miss Margaret Leavitt has returned to duty, having recovered from a severe cold.

Miss M. Scriver, who has been a patient at the Western Hospital for some weeks, is improving.

Miss Damon and Miss Hamilton have accepted positions in New York.

The sum contributed towards the club-house for graduate nurses, Montreal, by the Western Hospital Alumnae, was over $700.00, being the amount raised at their table at the Ritz-Carlton bazaar.

Jeffery Hales' Hospital, Quebec.

At the recent meeting of the Alumnae Association they were much interested in an address by Dr. James Stevenson on "Regional Anaesthesia."

Miss Elizabeth Matheson (1920) has been appointed assistant night supervisor at Harper Hospital, Detroit.

Royal Victoria Hospital, Montreal

The graduation exercises of the class of 1923 were held on March 15th in the Nurses' Residence. Sir Vincent Meredith acted as chairman and also

presented the prizes, which were won by Miss Grace Kuhring, of Toronto, and Miss Ruth Graham, of Edmonton. Lady Holt presented the medals and diplomas, after which Dr. F. T. Tooke spoke briefly to the nurses. At the conclusion of the exercises, tea was served in the reception room.

The annual dinner given by the Alumnae Association in honor of the graduating class was held in the Ritz-Carlton Hotel on March 14th. There were 200 members present, and the guests were seated together at a table adorned with baskets of golden daffodils and purple iris. The following toasts were proposed: "The King," Miss Goodhue; "The Governors," Miss Eileen Flanagan; "The Doctors," Miss Pauline Ward; "Our Absent Friends," proposed by Miss Guernsey and responded to by Mrs. T. Oliver Hamilton (Miss Sara Chisholm, 1914); "Our Guests," proposed by Miss Mabel Lindsay (1898), was responded to in a bright little speech by Miss Marjorie Bell, the senior of the class of 1923.

Miss Irene Jackson (1918) has taken a position in the X-ray department of the hospital at Grande Mere, Quebec.

Miss Ruth Graham (1923) has been appointed assistant head nurse on the third floor, Ross Pavilion.

Miss Barbara Widder (1918), who has been seriously ill with pneumonia, is convalescing at her home in Paris, Ont.

* * * *

ONTARIO

Toronto General Hospital

Miss Georgia McCulloch (1921) has been appointed assistant superintendent of nurses at Toronto Orthopedic Hospital, and Miss Peacock (1922) has taken the position of instructress of probationers.

Miss Florence Armstrong (1918) has resigned from the staff of the Toronto General Hospital. She expects to enjoy an extended trip to Europe.

Miss Nettie Fiddler (1919) has taken charge of the emergency department.

Miss Ham (1920) has taken charge of the admitting department.

Miss Jean Menzies (1922) is to go to China shortly as missionary nurse under the Presbyterian Church. Misses Brodie (1922) and Cardwell (1921) are also going to China in September to do missionary work there.

The following nurses are in Cochrane assisting during the typhoid epidemic there: Misses Bertha Woolford, Flora Wilson, Muriel Locke, Laura Beal, Bessie Latter, Jessie Empy, Flossie Goulding, Frances Carnagie, Reta Veitch, and Laura Sime.

Toronto Western Hospital A. A.

Miss Grace Sutton (1920) has resigned from the staff of the Toronto Orthopedic Hospital for family reasons.

The regular monthly meeting of the T.W.H.A.A. was held on April 13th. A very interesting address was given by Dr. C. Stewart on "Arthritis." Arrangements were made to celebrate the 25th anniversary of the Training School on May 25th, 1923, when it is hoped that as many of the graduates as are able to attend will do so. It will be in the form of a reception and dance. The guests on this occasion will be the 1913 class.

London

London delegates to the G.N.A.O. annual meeting, held recently at Peterboro, returned with splendid reports of the convention. Among them were Miss Lenore Kinsella, delegate from St. Joseph's Alumnae; Miss Madeline Adams, delegate from Victoria Hospital Alumnae; Mrs. A. C. Joseph, first vice-president of the G.N.A.O.; Miss McDermid, in charge of public health nurses at Western University; Miss M. Rose and Miss E. McPherson, of the Victoria Hospital Alumnae. They were pleasantly entertained while in Peterboro, a banquet being tendered them by the Medical Association and Peterboro Chapter of the G.N.A.O., and a tea in the green room of the Y.W.C.A. by the Local Council of Women. The Motor League entertained the members by taking them in motors to all the principal points of interest around the city.

Most instructing lectures were given recently at the Academy of Medicine by Dr. A. J. Ochsner, of Chicago, on "Appendicitis, Gastric Ulcers and Cancer," and on "Tuberculosis of the Kidney and Bladder," by Dr. Austin, Porfessor of Surgery in Queen's University, Kingston.

Hamilton General Hospital

Miss Ada Scheifele (1922) is being sent to a hospital in Central India by the Presbyterian Foreign Mission Board.

Miss Grace Servos has been appointed industrial nurse for Canadian Westinghouse Co., Hamilton.

Miss Ada Squires has been added to the staff of assistants in the O.R., Hamilton General Hospital.

Miss Anna Thompson (1922) has accepted a position in the Lady Minto Hospital, New Liskeard, Ont.

Misses Ayrst and Creasor have resigned from the staff of the H.G.H.; the former to have charge of the children's surgical ward of the Long Island College Hospital, and the latter to be in charge of a private ward in the same institution.

The A.A. of the Hamilton General Hospital had a very successful "bridge" in the new residence of the nurses on April 10th, 1923, at which they realized $400.00 for the Memorial Fund.

Miss Carrie Lanaway has accepted a position in the Fox Memorial Hospital, Oneonta, in the Catskill Mountains, N. Y.

Miss F. Forrey is at the Herman Keefer Hospital, Detroit.

Miss Dorothy French has been appointed to the staff of the Stoney Wold Sanitarium, Lake Kushaque, N. Y.

Miss Christine Anderson and her sister, who were badly injured in an automobile accident three weeks ago, are both convalescing.

Miss Minnie Pegg has been to the school nursing staff in Wentworth County.

Royal Alexandra Hospital, Fergus, Ontario

Mrs. Gertrude Mickle, R.N., has resigned her position as superintendent of the Royal Alexandra Hospital, Fergus, on account of ill health. Much regret is expressed at her resignation.

Miss Lillian Shelton (Royal Alexandra Hospital, 1920) has been appointed superintendent of the Memorial Hospital, Dunville, Ont.

Peterboro

Miss Eva Archer recently resigned her position as assistant superintendent of the Nicholls' Hospital. Her marriage took place soon after leaving, and she was the recipient of much hospitality, including a party at the nurses' residence.

Miss Charlotte Gulliver has accepted a position in the Charles Dix Hospital, Gettas, South Dakota.

Fort William

On Sunday, March 25th, 1923, the Thunder Bay Nurses' Association held a sacred concert at the Orpheum Theatre in aid of the Nurses' Memorial Fund. A good attendance favored the nurses, and the programme was much appreciated. The sum of $157.00 was realized, which proved how successful it had been.

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MANITOBA

The ninth annual meeting of the Manitoba Association of Graduate Nurses was held in Winnipeg on Tuesday, January 30th, with over 150 members in attendance.

The morning session was opened by Archdeacon McElheran, when he referred to the nursing profession as being one of the greatest professions of the world and one that was doing the most for humanity, and urged the association to give more publicity to the work.

The president, in her address, referred to the higher education of nurses being necessary, and asked the hearty support of all in the effort of the Legislative Committee to obtain amendments to the Act for Manitoba.

Attention was called to our shortcomings and the crying need for better preparation for many branches of our work, and not only for better bedside care of the actual sick, but for a sounder and broader knowledge of the causes and prevention of illness; also to the 100,000 visits (apart from private duty nurses) made during the year by nursing organizations, and the tremendous possibilities of such contacts with the community—each nurse useful in proportion to her sympathies, her ideals, her breadth of vision, and her capacity for work and leadership. Emphasis was also placed on Canadian universities now giving post-graduate courses for nurses.

The recording secretary reported a most successful year, the association having a paid-up membership of 257, and 98 members who successfully passed the university examinations in June. Emphasis was given to the October meeting, when the association engaged the services of Dr. Olin Beard, of the University of Minnesota, as their contribution to the Hospital Association, which met in Winnipeg. His addresses and conferences were an inspiration to those who had the privilege of hearing him.

The treasurer's report showed a revenue of $1,148.97, with disbursements of $1,116.00.

Reports of other committees were given during the morning, including Nurses' Directory, Recording Secretary, Membership, Public Health, Private Duty, Red Cross, Memorial and Legislative, Nominating, Sick Visiting, and Programme Committee.

A Committee on Resolutions was appointed, to be composed of Misses Bersis, Johnson, Jaffres, and Mrs. Bruce Hill.

A most interesting round-table conference was held on the nursing problems, principally in connection with giving care to the middle classes.

In the afternoon Dr. M. S. Fraser, of the Provincial Board of Health of Manitoba, addressed the meeting on "Public Health in Manitoba."

Dr. Gordon Bell gave a most carefully prepared address on "Insulin Treatment for Diabetss," speaking of the research that led to the discovery of insulin, the form of treatment by same, and the results obtained.

Miss Spanner, of the Children's Hospital, gave a talk on the post-graduate course for nurses which was inaugurated at McGill University.

"Making a Better World," by Dr. McKay, president of Manitoba College, closed the afternoon session.

The evening session was also well attended, when Dr. Hugh Mackay gave an illustrated lecture on "Radium."

During the year the Manitoba Association purchased slides on "History of Nursing" from Dr. Abbott, McGill University, to be used by the different training schools of the province, and during the evening they were exhibited.

The following resolution was presented by the committee:

"Resolved, that the Manitoba Association of Graduate Nurses respectfully direct the attention of the Provincial Government of Manitoba to the conditions which exist regarding the establishment, maintenance and direction of training schools for nurses in connection with the hospitals throughout the province."

"These institutions, offering education to women in one of the most vital and difficult of arts, are to-day totally unsupervised. They are under no obligation to maintain proper educational standards nor to provide suitable teaching material or personnel."

"The directorates of many of our hospitals endeavor to maintain good standards, but the nurses of Manitoba feel that the proper instruction of nurses is of such vital importance to the community that nursing education should be recognized, supervised and controlled by the province, through and by the University of Manitoba, under which body the Nurses' Registration Act is at present administered."

The Manitoba Association of Graduate Nurses have been successful in obtaining amendments to their Act, as follows:

"The minimum standard of education for the student nurse must be one year high school or its equivalent."

"All hospitals maintaining a training school must be in charge of a registered nurse."

"All hospitals maintaining a training school, having a daily average of less than twenty patients, must provide affiliation for their students in a larger hospital, where they may obtain their education on subjects in which they are deficient."

* * * *

SASKATCHEWAN

SASKATOON

Miss A. M. Campbell, R.N. (St. Paul's Hospital, Saskatoon), has taken over the management of the Biggar Nursing Home.

At the regular meeting of the S.G.N.A. on April 3rd it was decided to hold a "rummage sale" to augment the general funds.

Miss M. E. Campbell was appointed to secure new subscribers for the "Canadian Nurse" magazine.

REGINA.

The annual meeting of the Regina branch of the Registered Nurses' Association was held at the Baby Welfare on April 12th. Dr. Jacks gave a very interesting address on "The History of Surgery," which was much appreciated by the large number present. Miss Simpson, as convenor of the Provincial Memorial Committee, having made a request for a further contribution to the Memorial Fund, plans were made and special committees appointed to carry out the plans suggested.

The following officers were elected: President, Miss E. M. Lyne; first vice-president, Miss M. F. Gray; second vice-president, Miss MacGillivray; secretary, Miss C. Andrew; treasurer, Miss E. Nicholson.

* * * *

ALBERTA

CALGARY.

A very enjoyable "bungalow apron dance" was held recently under the auspices of the C.A.G.N. Much amusement was caused by "arresting" those guilty of wearing silk dresses or stockings. Men wearing starched collars were also arrested. The offenders were taken to jail by Sheriff Green, of Washington.

A most instructive address was given at a special meeting of the association by Miss Jessie Errol, principal of the School for the Mentally Deficient, who spoke on her work. She told of the modern method of dealing with those unfortunates who have not the normal mind, and of the success shown by the results of such schools. A social hour closed a most interesting meeting.

Miss Eleanor McPhedran, R.N., registrar of the Alberta Graduate Nurses' Association, addressed a meeting of the C.A.G.N. on "Registration," showing just what the value to the public was, through the certifying by a responsible body, delegated by the legislature for this work, of the standards required by the nurses holding the R.N. certificate. Mrs. R. P. Stuart Brown, president, presided at both services.

* * * *

BRITISH COLUMBIA

The annual meeting of the Graduate Nurses' Association of British Columbia was held April 2nd and 3rd at the Heather Street Annex of the Vancouver General Hospital. Meetings of the Council were held before the general meeting on the afternoon of Easter Monday. The morning was taken up with group meetings of the three committees, those of public health, private duty nursing and nursing education. The public health meeting had, in addition to a round-table conference and question-box, short papers on "Follow-up Work in Tubercular Nursing," by Miss J. Peters, R.N., of the Rotary Clinic staff; Miss Mary Ard MacKenzie, R.N., of the University of B. C., a most interesting one

on "The Pre-School Age Child." Miss Jean Urquhart, R.N., wrote a paper on "Junior Red Cross"; while Mrs. A. M. Stabler, R.N., director of the Red Cross Nursing Service in B. C., took as her topic, "How to Improve and Maintain Standards for Health Nurses." Miss Farren addressed the nurses on "Rural Dental Clinics."

The meeting of the Private Duty Nursing Committee filled the morning session with business, followed by a round-table conference and question-box.

The Nursing Education Committee held a busy morning presenting the re-arranged curriculum and other necessary information for the accredited training schools of the province.

At the afternoon session, April 2nd, the invocation was given by Rev. C. C. Owen, followed by an address of welcome from the Vancouver Medical Association, given by Dr. Mason, president. Miss A. McLellan, president of the Vancouver G.N.A., also welcomed the visitors, and the response was given by Miss K. Stott, president of the New Westminster G.N.A. The remainder of the afternoon was given up to business, excellent reports being given by the president, Miss Elizabeth Breeze; the secretary, the registrar, and standing committees. Special reports were given by Miss Breeze on the "Memorial Fund Committee," and the "Annual survey and report on conditions in the training schools of British Columbia" was given by Miss Randal. The Nursing Education Committee had charge of the evening's programme, which consisted of a splendid address on "Anaesthetics," by Dr. Freeze, and demonstrations of nursing procedures, given by the nurses of the Vancouver General Hospital.

Tuesday's meeting held the interest of those attending by papers: "Reminiscences of a Private Duty Nurse," sent in by a Victoria nurse; "The Teaching of Materia Medica," by Miss Margaret Fraser, instructor, V.G.H. and "The Private Physician and the Public Health Nurse," by Dr. E. D. Carder. Some unfinished business closed this session.

Dr. Alison Cumming addressed the nurses at the evening's meeting, taking as his subject "The Insulin Treatment of Diabetes," while Dr. C. Wesley Prowd held their interest by an address on "Radiotherapy." The announcement of elections showed that all the officers had been re-elected by acclamation, with Misses Stott and McAllister, of New Westminster; Miss Morrison, of Victoria; Misses Ellis and L. Archibald, of Vancouver; Miss A. L. Boggs, of Kamloops; and Miss Black, of Prince Rupert, elected as councillors.

Afternoon tea was served at the Nurses' Residence each afternoon. On Monday the members were the guests of the Alumnae Association of the Vancouver General Hospital, and on Tuesday the Vancouver Graduate Nurses' Association acted as hostesses for them. A large attendance, with keen interest shown, was an encouraging sign to all who had worked hard to arrange the programme and entertainment.

VANCOUVER

The graduating exercises of the 1923 class of St. Paul's Hospital were held April 12th in Lester Court, Vancouver. The following received the diplomas and pins from the school: Misses Bertha L. Girard, Mary Murphy, Matilda R. Diedericks, Blanche V. Lord, Marjorie A. Evans, Agnes J. Herres, Isobel M. Thomas, Margaret L. Zink, Lena C. Wirth, Helen C. Lutes, Helen M. Ross, Orisa M. King, Ethel A. Wilkinson, Alex. M. Kerr, Moira T. Dianahan, Hilda Massey, Katherine M. Doumont, Elizabeth Calladon, Clara Smith, Marjorie M. Mason, Anna H. Vatnsdal.

Pins and diplomas were distributed by His Grace Archbishop Casey and Mayor Tisdal. Special prizes were won by Misses M. Murphy, Alex. M. Kerr, L. Wirth, C. Smith, Marjorie Mason, B. Lord, E. Calladon, and M. L. Zink.

The regular meeting of the V.G.N.A. was held April 4th and was well attended. The speaker of the evening was Miss Bollert, Dean of Women, University of British Columbia, who gave a most interesting and entertaining address on "Folk Lore." Several names were added to the membership list. Addresses were given by Mayor Tisdall, Rev. Father Boyle and Dr. Vrooman. Dr. H. Storrs was the chairman and introduced those friends who so kindly gave their services to provide a most excellent programme of music and recitations.

Mrs. Anna Stabler, R.N., will speak to the nurses at the May meeting on "Industrial Nursing," and Miss Jean Urquhart, R.N., on "The Junior Red Cross."

The Alumnae Association of the Vancouver General Hospital held a springtime tea, with fortune-telling, in the Nurses' Home on Saturday afternoon, April 28th. An excellent musical programme was given. The proceeds are to be used in connection with the reunion of the Alumnae in June.

Victoria

The April meeting of the Victoria G.N.A. was held on April 15th at the V.O.N. Home. Those present showed a keen interest in the report of the provincial convention held Easter Monday and Tuesday in Vancouver. Much satisfaction was expressed with the report of the Memorial Committee, and also at the news of a summer course at the University of British Columbia for nurses.

The rummage sale had realized $70.00 for the purpose of refurnishing the nurses' memorial room at the Royal Jubilee Hospital.

A most successful dance and card party was held at the Royal Jubilee Hospital Nurses' Home, where about 150 dancers gathered to enjoy the results of the preparations arranged by the committee in charge. The proceeds were for the fund for refurnishing the memorial ward in the hospital.

The sympathy of the nurses was expressed for Miss Hardie, whose mother died recently.

St. Joseph's Hospital, Victoria.

The class of 1923 of St. Joseph's Hospital, Victoria, held their graduation exercises on April 12th at St. Ann's Academy Auditorium, Victoria. The following comprise those who received diplomas and pins on this occasion: Misses Elizabeth M. Collins, Margaret McNeill, Jeanne F. V. Robbins, Phyllis A. Carter, Nina E. A. Turner, Illace E. Gardner, Cecelia M. C. Roy, Mary L. S. Walsh, Margaret H. Muir, Agnes M. Lee, Dorothea McBride, Kathleen C. H. Fraser, Birdie M. Service, Dorothea E. Riddell, Frances M. L. Whillans, Helene L. Elliott, Mae I. Cashen, Mary A. MacKenzie, and Dorinda A. G. Floyd.

Nanaimo General Hospital

The graduation exercises of the 1923 class of the Nanaimo General Hospital were held on March 22nd, 1923, at 7.30 p.m. Those graduating were: Misses Nellie M. Gable, Olive Green, Dorothy A. Haggart, and Mary B. Walker.

The exercises were held in the Forresters' Hall, which was decorated for the occasion. Addresses were given by Dr. McPhee, Dr. Brown (president of the Hospital Board), and Miss Helen Randal, R.N., registrar of the G. N. A. of B. C. The Florence Nightingale pledge was taken by the nurses. Diplomas and pins were presented by Miss Rose, R.N., superintendent of nurses. A musical programme added materially to the enjoyment of the guests. Following the formal exercises, a reception with dancing closed the delightful function.

BIRTHS

Cameron—At East River, St. Mary's, Pictou County, Nova Scotia, on March 3rd, 1923, to Mr. and Mrs. John McK. Cameron (Martha H. Dickson, Jeffery Hales' Hospital, Quebec, 1910), a daughter.

Carlisle—On Easter Sunday morning, April 1st, 1923, to Dr. and Mrs. Vernon Carlisle (Helen Cringan, Toronto Western Hospital, 1920), of Mount Dennis, a son.

Matson—At Sault Ste. Marie, Ont., on March 20th, 1923, to Mr. and Mrs. Matson (Gertrude Conlin, Riverdale Hospital, Toronto, 1918), a daughter.

Rose—In Vancouver, B. C., at the Bute Street Hospital, to Mr. and Mrs. J. B. Rose (Ethel Boultbee, Vancouver General Hospital), a daughter (stillborn), on April 12th, 1923.

Russell—To Mr. and Mrs. Russell (Grace Douglas, Western Hospital, Montreal), a daughter, at the Montreal Maternity Hospital.

Shaw—On April 4th, 1923, at the Private Pavilion, Toronto General Hospital, to Lieut.-Col. and Mrs. John A. Shaw (Jessie Anderson, Toronto General Hospital, 1921), a son, James Randolph.

Slee—On January 9th, 1923, at Kuala Lumpur, Malay Free States, to Mr. and Mrs. Arthur B. Slee (Monica Green, R.N., St. Joseph's Hospital, Victoria, B. C.), a son.

Thompson—At the Cottage Hospital, Toronto, Ont., on March 8th, 1923, to Mr. and Mrs. Walter H. Thompson (Mae Morningstar, Riverdale Hospital, Toronto, 1917), a daughter.

MARRIAGES

Campbell-Baker—In Calgary, Alberta, February 16th, 1923, Bernice Baker (St. Paul's Hospital, Saskatoon, 1918) to Mr. A. Campbell, of Saskatoon. Mr. and Mrs. Campbell will reside at Suite 5, Rideau Apartments, Saskatoon.

Davidson-Golightly—On March 1st, 1923, Jessie Golightly (Royal Alexandra Hospital, Fergus, Ont., 1920) to Nelson Davidson, of Fergus, Ont.

Dunn-Crowe—On March 29th, 1923, at the parsonage of the bride's brother-in-law, Rev. A. P. Wilson, 325 Soudan Avenue, Toronto, Mary Johnston, daughter of Mr. and Mrs. Alexander Crowe, 60 Coursol Street, Montreal, Que., to Samuel Dunn, of Montreal.

Laidlaw-Thomson—At Hagersville, Ont., on March 7th, 1923, Ellen M. Thomson (Hamilton General Hospital) to Mr. Frank Laidlaw, of Jarvis, Ont.

McDougall-Frasier—On Thursday, March 22nd, 1923, Mabel Helena McDougall (Royal Victoria Hospital, Montreal, 1920) to Mr. Karl Parkinson Frasier. Mr. and Mrs. Frasier will reside in Philadelphia.

Morse-Trowhill—On February 6th, 1923, Ina Trowhill (Royal Alexander Hospital, Fergus, Ont., 1920) to George Morse, Cleveland, Ohio.

DEATHS

Wrinch—At her home at Hazelton, B. C., on March 11th, 1923, Alice Jane, dearly beloved wife of Horace Cooper Wrinch, M.D. Mrs. Wrinch was a graduate of Grace Hospital, Toronto.

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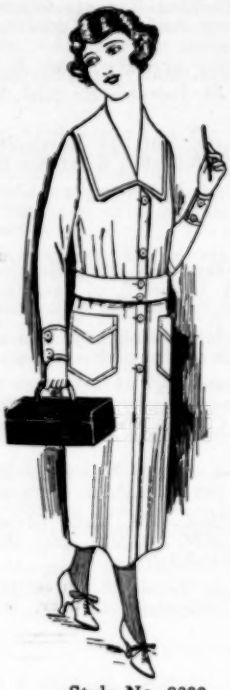

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Regular monthly meeting—First Tuesday, at 8 p. m.

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Monthly Meeting—Third Wednesday, at St. Joseph's Assembly Hall.

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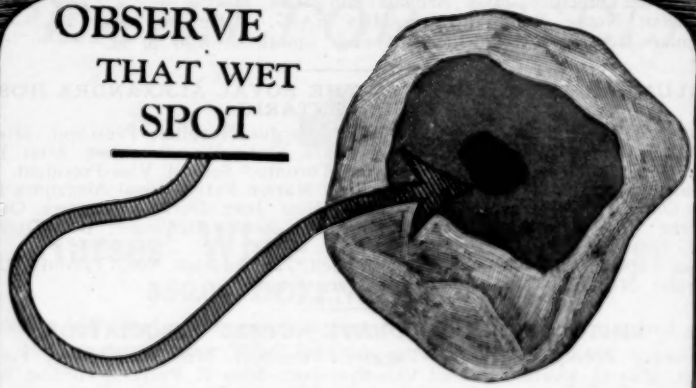

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Regular Meetings, First Friday of each month at 8 p.m.

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Regular Meetings—Second Thursday of each Month.

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Representative to Central Registry—Miss T. Gurry.

Representative on "Canadian Nurse"—Miss E. Dermody, 157 Catherine St., South.

Regular Meeting—First Tuesday, 4 p.m.

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Regular Monthly Meeting—Last Tuesday, at 2:30 p.m.

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Regular Meeting—Second Wednesday, 8 p.m.

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Sick Committee—Miss R. Waters, Port Huron; Miss Ilhargey, Detroit, Mich.; Miss E. Mann, Chatham, Ont.

Regular Monthly Meetings—First Monday of each month at 3 p.m.

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Regular Meetings—First Friday of each month in assembly hall of hospital.

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Regular Monthly Meeting—Second Monday, at 8 p.m.

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Representative to "Canadian Nurse"—Miss Theresa Fitzpatrick, 753 Wolseley Ave.

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Incorporated March, 1917

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"Canadian Nurse" Representative—Miss A. Green, 413 Fifth Street; Miss E. Auger, Medicine Hat General Hospital.

Regular Meeting—First Monday in each month.